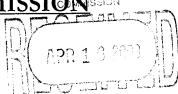
# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION



ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



WS-03953A Bachmann Springs Utility Company P. O. Box 9 Tombstone AZ 85638

# **ANNUAL REPORT**

le 1/30/03/1.

FOR YEAR ENDING

12 31 2002

FOR COMMISSION USE

ANN05 02

PROCESSED BY: 4/23/03 Cm SCANNED

# **COMPANY INORMATION**

Mailing Address P.O. Box	9			
(Street) Tombstone		AZ		85638
(City)		(State)		(Zip)
520 457 3100		520 457 3004		
Telephone No. (Include Area Code)		Fax No. (Include Area Code)		Pager/Cell No. (Include Area Cod
Email Address				
Local Office Mailing Address	601 E.	Fremont		
Tombstone	(St	reet) AZ		85638
(City)		(State)		(Zip)
		•		
Local Office Telephone No. (Include Area C	Code)	Fax No. (Include Area Code)	. ]	Pager/Cell No. (Include Area Code
Email Address				

# MANAGEMENT INFORMATION

Ianagement Contact: Glenn	n R. Grossman	Secret	ary/Treasurer
	(Name)		(Title)
P.O. Box 9	Tombstone	AZ	85638
(Street)	(City)	(State)	(Zip)
520 457 3100	520 457 3004	•	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell N	o. (Include Area Code)
Email Address ggrossman@bag	chmannsprings.com		
	s Heid		
	•	AZ	85638
On Site Manager:James	s Heid (Name)	AZ (State)	85638 (Zip)
On Site Manager: James P.O. Box 9	s Heid (Name) Tombstone		
On Site Manager: James P.O. Box 9  (Street)	(Name) Tombstone (City)	(State)	
Dn Site Manager: James P.O. Box 9  (Street)  520 457 3100	(Name) Tombstone (City) 520 457 3004 Fax No. (Include Area Code)	(State)	(Zip)

Statutory Agent: Richard		
	(Name)	
2525 E. Arizona Biltmore (	Circle #117 Phoenix (City)	AZ 85016 (State) (Zip)
		(State) (Zip)
602 224 9222 Telephone No. (Include Area Code)	602 224 9366 Fax No. (Include Area Code	Pager/Cell No. (Include Area Code)
Attorney: Richard L. Sallqu		
	(Name)	
2525 E. Arizona Biltmore C	Circle #117, Phoenix (City)	AZ 85016 (State) (Zip)
602 224 9222	602 224 9366	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
<u>OV</u>	WNERSHIP INFORMAT	ION
Check the following box that applies to	your company:	
Sole Proprietor (S)	X C Corporation	(C) (Other than Association/Co-op)
Partnership (P)	☐ Subchapter S C	Corporation (Z)
Bankruptcy (B)	Association/Co	op (A)
Receivership (R)	Limited Liabili	ty Company
Other (Describe)		
	COUNTIES SERVED	
	COUTTIEU SERVIE	
Check the box below for the county/ies	in which you are certificated to	provide service:
<b>П</b> АРАСНЕ	X COCHISE	☐ COCONINO
GILA	☐ GRAHAM	☐ GREENLEE
☐ LA PAZ	☐ MARICOPA	☐ MOHAVE
☐ NAVAJO	☐ PIMA	☐ PINAL
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA
☐ STATEWIDE		

#### **UTILITY PLANT IN SERVICE**

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations	·		
370	Receiving Wells			
380	Treatment and Disposal Equip.			·
381	Plant Sewers		·	
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.		* .	
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS		-0-	

This amount goes on the Balance Sheet Acct. No. 108 \_\_\_\_

# **CALCULATION OF DEPRECIATION EXPENSE**

Acct.		Original	Depreciation	Depreciation
No.	DESCRIPTION	Cost (1)	Percentage (2)	Expense (1x2)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations	·		
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment	·		
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment	·		
395	Power Operated Equipment	·		
398	Other Tangible Plant			
	TOTALS			-0-

This amount goes on Comparative Statement of Income and Expense Acct. 403

#### **BALANCE SHEET**

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
132	Special Deposits		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$ -0-	\$ -0-

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

### **BALANCE SHEET (CONTINUED)**

Acct.		BALANCE AT BEGINNING OF	BALANCE AT END OF
No.	LIABILITIES	TEST YEAR	YEAR
	CURDENT LIABILITES		
231	CURRENT LIABILITES	•	Ф.
	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	Zong Toma Motor data Bonds		
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$	\$
253	Other Deferred Credits		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES		
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Other Paid in Capital		<b>T</b>
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CARRES		
	TOTAL LIABILITIES AND CAPITAL	\$ -0-	\$ -0-

# **COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

	OPERATING REVENUES	PRIOR YEAR	TEST YEAR
521	Flat Rate Revenues	\$	\$
522	Measured Revenues		
536	Other Wastewater Revenues		
	TOTAL REVENUES	\$ -0-	\$ -0-
	OPERATING EXPENSES		
701	Salaries and Wages	\$	\$
710	Purchased Wastewater Treatment		
711	Sludge Removal Expense		
715	Purchased Power		
716	Fuel for Power Production		
718	Chemicals		
720	Materials and Supplies		
731	Contractual Services – Professional		
735	Contractual Services – Testing		
736	Contractual Services – Other		
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense		
775	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Taxes		
<del></del>	TOTAL OPERATING EXPENSES	\$ -0-	\$ -0-
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/EXP	\$ -0-	\$ -0-
	NET INCOME/(LOSS)	\$ -0-	\$ -0-

# SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN	#1	LOAN	#2		LOAN #3			LOAN #	4
Date Issued										
Source of Loan										
ACC Decision No.		· · · · · · · · · · · · · · · · · · ·								
Reason for Loan						,				
Dollar Amount Issued	\$		\$ 		\$			\$		
Amount Outstanding	\$		\$		\$			\$		
Date of Maturity								-		
Interest Rate		%		%			%			%
Current Year Interest	\$		\$		\$			\$		<del></del>
Current Year Principle	\$ -0-		\$ -0-		\$·	-0-		\$	-0-	

# **WASTEWATER COMPANY PLANT DESCRIPTION**

#### TREATMENT FACILITY - NONE

	IREATIV		<u> FACILITI</u>	<b>-</b> 1	NONE	
TYPE OF TREATMENT (Extended Aeration, Step Ae Ditch, Aerobic Lagoon, Anac Trickling Filter, Septic Tank,	erobic Lagoon,					
<b>DESIGN CAPACITY OF I</b>	PLANT					
(Gallons Per Day)					· · · · · · · · · · · · · · · · · · ·	
	LIFT STATION	FAC	ILITIES	- 1	ONE	
Location	Quant of Pun		Horsepower Per Pump		pacity Per mp (GPM)	Wet Well Capacity (gals)
						,
	FOR	CE N	<u> MAINS</u>	- N	ONE	,
Size	Ma	ateria	1	<del></del>	Lan	gth (Feet)
4-inch			<u> </u>		Leu	gin (reei)
6-inch						
					,	
<u>M</u>	IANHOLES - N	IONE			CLE	ANOUTS
Туре	Quan	tity		ĺ	C	Quantity
Standard						
Drop						
				ł		

### WASTEWATER COMPANY PLANT DESCRIPTION CONTINUED

#### COLLECTION MAINS - NONE

SERVICES - NONE

Size (in inches)	Material	Length (in feet)
4		
6		
8		
10		
12		
15		
18		
21		
24		
30		

Size (in inches)	Material	Quantity
4		
6		
8		
.12		
15		
		·

# FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY

SOLIDS PROCESSING AND HANDLING FACILITIES	NONE	
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	NONE	
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	NONE	
STRUCTURES (Buildings, Fences, Etc.)	NONE	
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	NONE	

COMPANY NAME	Bachmann	Springs	Utility	Company
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#### WASTEWATER FLOWS - NONE

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY
		·	
			·

#### PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE

Method Of Effluent Disposal (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	NONE
Wastewater Inventory Number (all wastewater systems are assigned an inventory number)	
Groundwater Permit Number	
ADEQ Aquifer Protection Permit Number	
ADEQ Reuse Permit Number	
EPA NPDES Permit Number	-

# **STATISTICAL INFORMATION**

Total number of customers	0	 	A	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
Total number of gallons treated	0				gallons
		•			

COMPANY NAME\_\_\_Bachmann Springs Utility Co.

**YEAR ENDING 12/31/2002** 

#### **INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported	-0-
Estimated or Actual Federal Tax Liability	-0-
State Taxable Income Reported	-0-
Estimated or Actual State Tax Liability	-0-

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances	-0-
Amount of Gross-Up Tax Collected	-0-
Total Grossed-Up Contributions/Advances	-0-

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

#### **CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

Myssma	04/11/03
SIGNATURE	DATE
Glenn R. Grossman	Secretary/Treasurer
PRINTED NAME	TITLE

COMPANY NAME_	Bachmann S	prings Utili	ty Company	YEAR ENDING 12/31/2002
		PROPER'	ΓΥ TAXES	
Amount of actual prop	perty taxes paid d	luring Calendar Y	ear 2002 was: \$_	-0-
Attach to this annual reproperty tax payments				full" or copies of cancelled checks for dar year.
If no property taxes pa	id, explain why			

# VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only



	inclustate ite endes on		
VERIFICATION			
STATE OF	County of (County Name)	Control of the second s	Company of the Party.
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) TITLE Glenn R. Grossman - Sec	retary/Treasurer	
OF THE	COMPANY NAME Bachmann Springs Utility	y Company	

#### DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA COPRORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2002

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> <u>UTILITY OPERATIONS DURING CALENDAR YEAR 2002 WAS:</u>

Arizona IntraState Gross Operating Revenues Only (\$)

\$-0-

(THE AMOUNT IN BOX ABOVE INCLUDES \$\_\_\_\_\_\_ IN SALES TAXES BILLED, OR COLLECTED

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

///k DAY OF

Cochise

TELEPHONE NUMBE

MONTH April

520+457-3/100

2003

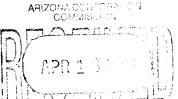
SIGNATURE OF NOTARY PUBLIC

ISION EXPIRES 06/26/05

#### VERIFICATION AND

#### SWORN STATEMENT RESIDENTIAL REVENUE

INTRASTATE REVENUES ONLY



VERIFICATION

STATE OF Arizona	) (COUNTY NAME)	Cochise	philippe description of the constraint of the co
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) Glenn R. Grossman		Secretary/Treasurer
OF THE	Backmaffn Springs Utility Company		

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 12 31 2002

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE UTILITY OPERATIONS</u> RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2002 WAS:

ARIZONA INTRASTATE GROSS OPERATING	REVENUES
<u>\$</u>	

(THE AMOUNT IN BOX AT LEFT INCLUDES \$ \_ -0~ IN SALES TAXES BILLED, OR COLLECTED

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

NATURE OF OWNER OR OFFICIAL

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

11th

DAY OF

Patricia Maxwell

COUNTY NAME Cochise

MONTH April

, 20**03** 

(SEAL)

PATRICIA MAXWELL Notary Public - Arizona COCHISE COUNTY My Comm. Exp. 06-26-05

MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC